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ABSTRACT

This evaluation report of Oregon's early intervention programs describes the Oregon Preschool Assessment System, presents demographic information, and summarizes results of analysis of data on children's progress. It concludes that the infants and children enrolled (2,740 in 1991) are making substantial gains in all areas assessed. These gains occur across age groups, type of program, severity of disability, and level of integration. It recommends review and revision of the Oregon Preschool Assessment System (OPAS). This measure assesses the child's social, communication, cognitive, academic, self-help, and motor skill areas. Demographic information is based on 1991 OPAS data sheets and is analyzed in terms of age groups, type of program, level of integration, and determination of eligibility. Statistics showing student gains are provided for each skill area, for both 1990 and 1991, for each age (0-6), and by type of program. (DB)

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IN EARLY INTERVENTION PROGRAMS

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Prepared for the
Oregon Department of Education
Mental Health and
Developmental Disability
Services Division
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Early Intervention Council

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Oregon Department of Education,

Mental Health and Developmental Disability Services Division

and

Early Intervention Council

by the

Northwest Instructional Design

Darla Wilson
Meredith Brodsky

1991

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I. Introduction

In Oregon, any child between the ages of birth and five, who has a substantial disability or is at risk of developing a substantial disability, is eligible for early intervention services. Services may include access to classrooms with programs specifically designed for children with disabilities, support from early intervention specialists for children who attend regular education preschool programs, and information and consultations for a child's family. To determine eligibility for services, early intervention specialists look at a child's development in seven areas: Gross Motor Skills, Fine Motor Skills, Expressive Language, Receptive Language, Cognitive Skills, Self-Help Skills, and Relationships.

Early intervention programs are funded by the Oregon Department of Education (ODE) and the Oregon Mental Health and Developmental Disability Services Division (MHDDSD). Services are available in communities throughout Oregon. To comply with Senate Bill 1146 special education services must be available to every child with a disability between the ages of three and five years old. To accomplish this, staff from ODE and MHDDSD have been working with Community Mental Health Programs, local Early Intervention advisory groups, providers, and school districts to inform them of early intervention services. In the last eight years the number of children in Oregon's early intervention programs has more than doubled (see Figure 1). Educators and parents consider this increase an indicator of the program's success as medical personnel and family consultant specialists have become more familiar with early intervention resources.

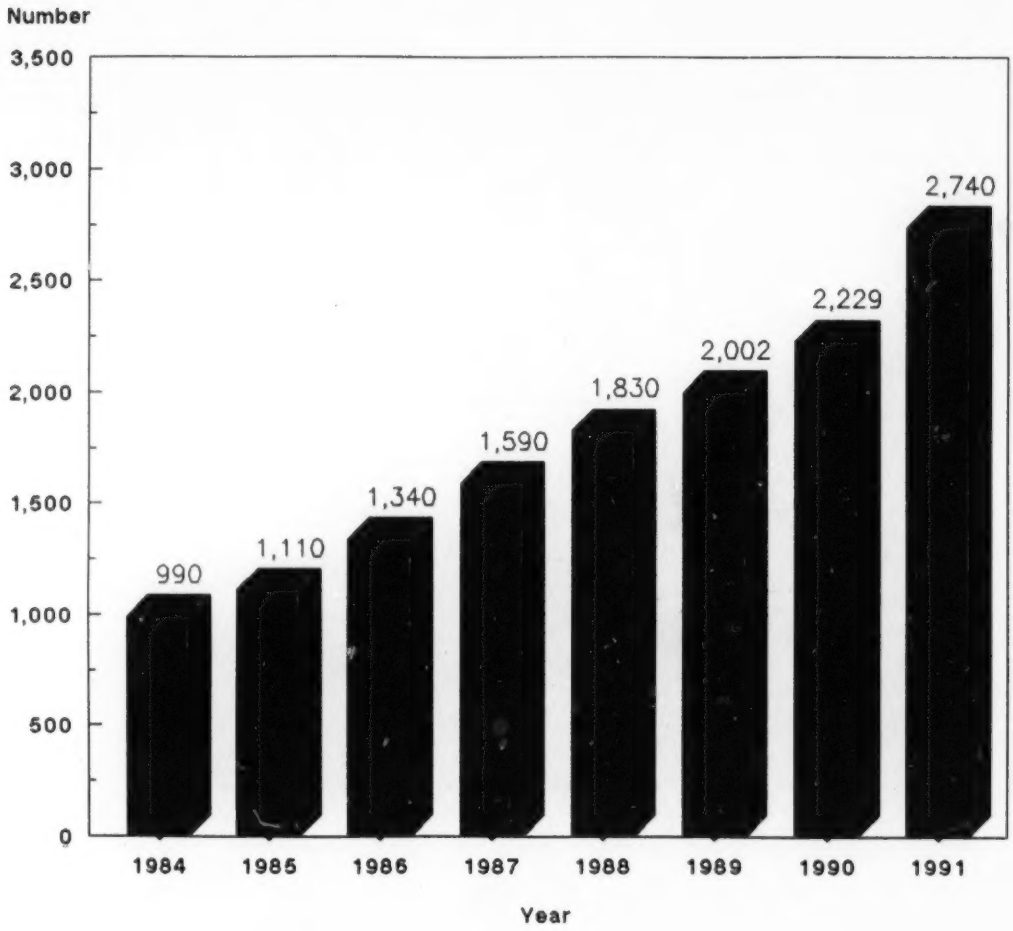


Figure 1. The number of infants and children in Oregon's early intervention programs has more than doubled during the last eight years.

Each spring, early intervention programs are required to assess the progress of infants and children using the Oregon Preschool Assessment System, an assessment instrument developed for this purpose. This "Showing Progress" Report presents a portrait of the infants and children in early intervention programs during the 1990-91 school year and their mastery of skills in particular areas during that year.

Gross Motor Skills like walking, running, and jumping;

Fine Motor Skills like grasping, holding, lifting, and placing items during play and other activities;

Expressive Language, used to express needs and share ideas - for example, speech, signs, gestures, and picture boards;

Receptive Language that we use when we understand what someone has communicated to us;

Cognitive Skills that demonstrate an understanding of patterns and relationships;

Self-Help Skills like eating, dressing, and personal hygiene;

Relationships that involve social interactions.

Figure 2. Competencies in these seven areas help determine whether early intervention may be helpful to a child.

II. OREGON PRESCHOOL ASSESSMENT SYSTEM

> *Each early intervention program shall provide ... an individual progress assessment for each child, on forms provided by the state agency.*
>
> *OAR 309-41-200 to 309-41-255*

When a statewide system of early intervention programs was created, it included a mandate that administering agencies conduct a statewide assessment of progress each year. The Oregon Preschool Assessment System was developed in response, to profile the gains of infants and children who receive early intervention services. This is the third *Showing Progress Report*. Each report has shown that infants and children in Oregon's early intervention programs are mastering skills in all areas regardless of their age, the type of program they attend, or the severity of their disability.

The Oregon Preschool Assessment System (OPAS) samples mastery of the types of skills that are typical of infants and young children without disabilities. For example, young infants learn to hold their head erect, roll over, and reach for objects; young children can typically wash and dry their hands, brush their teeth, and comb their hair; preschool children can often say the alphabet, trace letters, write their own name, and count objects.

Teachers and early intervention specialists complete an OPAS scoresheet for each child in early intervention by indicating what skills a child has mastered. Mastered means that a child uses the skills described in that item on a regular basis. For instance, if a child usually washes and dries his or her hands the item on handwashing is mastered (see Figure 3). If a child requires assistance from a teacher to turn on a faucet or use a

towel the item is not mastered. Any adaptive equipment is permissible. The "Handwashing" item is mastered even though a child might require a faucet attachment that helps him or her turn the handle more easily.

With OPAS no special testing is necessary. An item is marked based on observation of what a child usually does. When additional information is needed, parents and teachers can be asked about their experience in observing a child. As a result, OPAS is relatively easy and quick to administer. Its use allows the Oregon Department of Education and the Mental Health and Developmental Disability Services Division to report progress data to the Legislature as mandated. Because ratings are based on the same items throughout the State, the results can be summarized for the State as a whole, by age group, by type of program, and by severity of disability.

Item	Description	Conditions/Examples
Combs Hair	Brushes or combs own hair	brushes/combs in in direction of hair style - may be prompted

Figure 3. Each item has a title and includes a description and conditions or examples.

The items of the Oregon Preschool Assessment System are organized into six skill areas that represent major areas of development among infants and young children: Social, Communication, Cognitive, Academic, Self-Help, and Motor. Items, in all but the area of Social Skills, are further divided into sub-domains (see Figure 4).

Social	The 20 items of this domain focus on interactions between an adult and a child or a child and other children.
Communication	The use of signs, gestures, speech, or augmentative language devices. Receptive (10 items) Expressive (16 items) Language Concepts (10 items) Language Structure (9 items)
Cognitive	The items in this domain represent processes and problem-solving skills involving objects and events and the use of patterns and groupings. Objects & Events (11 items) Groups & Patterns (10 items)
Academic	Academics include preschool reading, writing, and number skills. Reading (9 items) Writing (9 items) Numbers (9 items)
Self-Help	Functional skills that allow a child to be independent in self-care. Personal Hygiene (9 items) Eating (17 items) Dressing (11 items)
Motor	The items focus on basic mobility skills and the functional manipulation of materials and equipment commonly available to infants and young children. Gross Motor (29 items) Fine Motor (13 items) Physical Fitness (17 items)

Figure 4. Domains and subdomains in OPAS.

OPAS Materials

The items in OPAS were thoroughly field tested as part of the design process. They were reviewed for relevance by early intervention specialists throughout Oregon who were also asked to edit items and add any items they felt should be included but were missing. The materials were then field tested with 200 children in early intervention programs, between the ages of 3 months and 7 years. Early intervention specialists completed test-retest and interrater reliability measures to evaluate the consistency with which items were rated. The results showed high reliability on both measures. Additionally, a second field test was conducted with 470 children who did not have disabilities. The results of this field test were used to validate previous results and to sequence the items.

OPAS materials include an Oregon Preschool Assessment System Booklet, a scoresheet, and an item Checklist. The Booklet includes an introduction to OPAS, directions for administering the assessment, and a description of each of the 209 items. The Booklet also provides space to record a child's mastery of items each year of early intervention services (see Figure 5).

Year	Domain: Cognitive						
19	1	2	3	4	5	6	
19	1	2	3	4	5	6	
19	1	2	3	4	5	6	
19	1	2	3	4	5	6	
19	1	2	3	4	5	6	

Figure 5. Space is provided to track mastery of items for up to five years in the Oregon Preschool Assessment Booklet.

Teachers record OPAS results on an OPAS Scoresheet (see Figure 6). Teachers circle or place a line through items that a child has mastered and uses at home or school. Items that have not yet been mastered are left blank. The mastered items are then totalled for each subdomain. If a child has an OPAS scoresheet on record for the previous year, the demographic section of the scoresheet is pre-printed and mailed to the child's last early intervention program. Teachers are asked to edit this information for accuracy and attach it to the scoresheet.

One copy of the scoresheet remains with the program and a second copy is sent to the Oregon Department of Education. Information from this copy is keyed and summarized. The demographic information is used to match scoresheets with those of the previous year. Only matched scoresheets are used to compute progress data.

The Checklist displays each of the 209 items by name. Each year, teachers can color over items that are mastered to give a visual chart of the acquisition of skills across time. Use of the Checklist is optional.

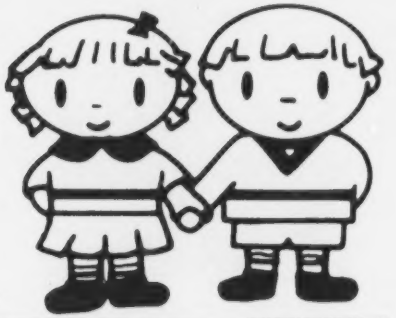
At the end of the school year, early intervention specialists are sent a graph for each child in their program. The graph shows OPAS assessment results. A sample sheet of this graph is shown in Figure 7.

Early intervention specialists are cautioned that OPAS results give a general idea of progress and cannot be used to determine eligibility or to develop individual program plans. Instead, they should rely on the greater specificity available through the use of standardized assessments for screening and eligibility and criterion-referenced instruments, checklists, and observations.

OREGON PRESCHOOL ASSESSMENT SYSTEM scoresheet

Social	Social	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	Total
Communication	Receptive	1	2	3	4	5	6	7	8	9	10											
	Expressive	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16					
	Language Concepts	1	2	3	4	5	6	7	8	9	10											
	Language Structure	1	2	3	4	5	6	7	8	9												
Cognitive	Objectives & Events	1	2	3	4	5	6	7	8	9	10	11										
	Groups & Patterns	1	2	3	4	5	6	7	8	9	10											
Academic	Reading	1	2	3	4	5	6	7	8	9												
	Writing	1	2	3	4	5	6	7	8	9												
	Numbers	1	2	3	4	5	6	7	8	9												
Self Help	Personal Hygiene	1	2	3	4	5	6	7	8	9												
	Eating	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17				
	Dressing	1	2	3	4	5	6	7	8	9	10	11										
Motor	Gross Motor	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
	Gross Motor (continued)	21	22	23	24	25	26	27	28	29												
	Fine Motor	1	2	3	4	5	6	7	8	9	10	11	12	13								
	Physical Fitness	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17				

DIRECTIONS
Circle the number of each item that the child has mastered for each domain/ subdomain.
Return Scoresheets to: Mike Barker, Oregon Department of Education, 700 Pringle Parkway, Salem, Oregon 97310



1. OPAS Testing Date:
2. Student Name:
3. Sex: M ☐ F ☐ 4. Birth Date:
5. County Code:
6. Program: DD ☐ Regional ☐ Both ☐
7. Level of Integration:
Full ☐ Partial ☐ E.I. Partial ☐ None ☐
8. Eligibility Criteria:
Under 18 Mos ☐ 18 Mos & Over ☐

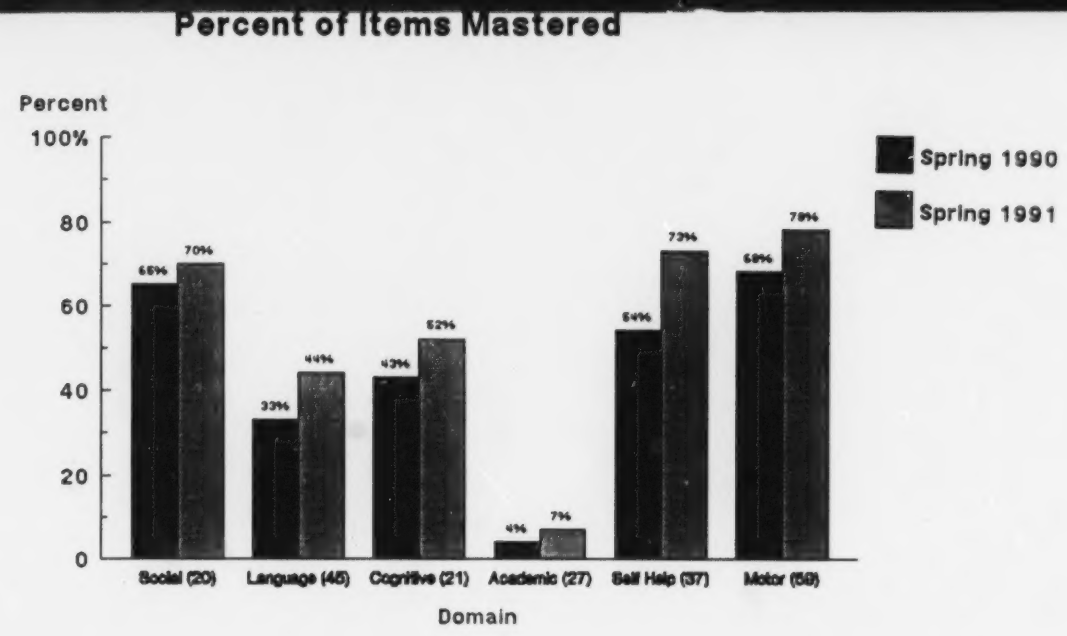
Vision Hearing DD

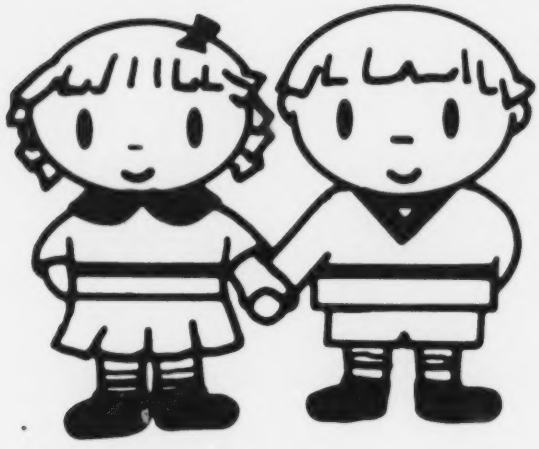
Gross Motor Fine Motor Exp Lang Rec Lang Cognitive Self Help Relations

9. Teacher Name:
10. Program Name:
Address:

Figure 6. The teacher keeps one copy of the OPAS Scoresheet; the other is mailed to the Oregon Department of Education.

OREGON PRESCHOOL ASSESSMENT SYSTEM





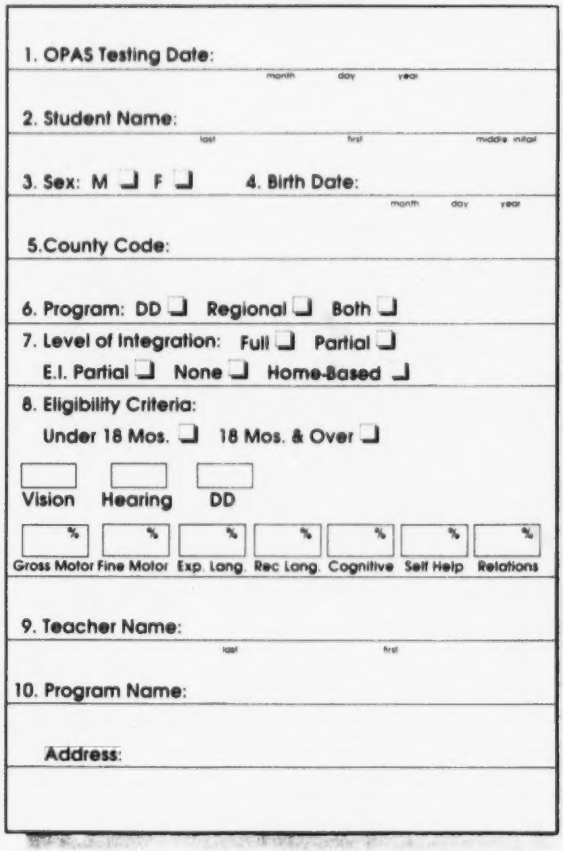
Explanation

The information in this graph shows the percent of items mastered for each domain. OPAS was designed to represent the range of skills typical of preschool children. Infants will have mastered only a few items within some domains while children four or five years old will often have mastered all of the items in an area. For this reason it is important to remember the age of the child when reviewing the graphs. Note also that percentages may "jump" faster in some domains than in others. For instance, a graph will typically show a faster rate of progress in Motor skills than in Academics. There are many more items in the Motor domain, the steps are smaller, and the items are relatively easier than Academics. Please interpret the graphs with these points in mind.

Figure 7. A sample graph showing the type of information that early intervention specialists receive for each child in their program.

III. DEMOGRAPHIC INFORMATION

The information in this section of the report is based on the 2,052 OPAS data sheets that were received in the spring of 1991. As part of the data reporting system, some descriptive information was gathered on each infant and child (see Figure 8). A tally of the number of data sheets by county provides a way of determining whether progress data has been obtained for a significant number of infants and children within each county. Other demographic information allows progress data to be summarized by age, type of early intervention program, level of integration, and severity of disability.


1. OPAS Testing Date: month day year

2. Student Name: last first middle initial

3. Sex: M ❑ F ❑ 4. Birth Date: month day year

5.County Code:

6. Program: DD ❑ Regional ❑ Both ❑

7. Level of Integration: Full ❑ Partial ❑
E.I. Partial ❑ None ❑ Home-Based ❑

8. Eligibility Criteria:
Under 18 Mos. ❑ 18 Mos. & Over ❑

Vision Hearing DD

% Gross Motor % Fine Motor % Exp. Lang. % Rec Lang. % Cognitive % Self Help % Relations

9. Teacher Name: last first

10. Program Name:

Address:

Figure 8. Demographic information that is collected along with OPAS results allows the data to be summarized in different ways.

The 2,052 infants and young children for whom OPAS data was completed in the 1990-91 school year represent 89% of the children enrolled in Oregon's early intervention programs. Table I shows the number of OPAS data sheets returned, by county.

Baker	3	Lane	163
Benton	52	Lincoln	29
Clackamas	160	Linn	63
Clatsop	18	Malheur	38
Columbia	-	Marion	116
Coos	27	Morrow	-
Crook	16	Multnomah	430
Curry	10	Polk	50
Deschutes	92	Sherman	-
Douglas	70	Tillamook	16
Gilliam	-	Umatilla	44
Grant	-	Union	30
Harney	6	Wallowa	10
Hood River	19	Warm Springs	45
Jackson	128	Wasco	24
Jefferson	48	Washington	137
Josephine	72	Wheeler	-
Klamath	52	Yamhill	74
Lake	10		

Table 1. Early intervention specialists completed 2,052 OPAS data sheets in the 1990-91 school year.

AGE GROUPS

Early intervention programs are funded for infants and children with substantial disabilities, birth to kindergarten age. This year, 1,986 OPAS scoresheets (97%) included information about age. The pattern of age group data has been generally the same each year OPAS data has been collected. Most children with OPAS data are three, four, or five years old (see Figure 9).

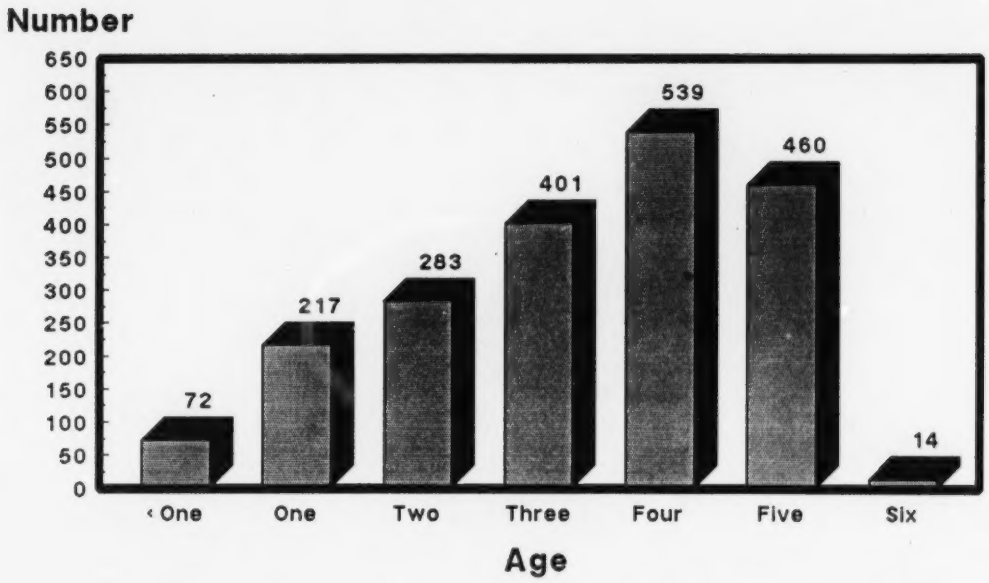


Figure 9. Most children in early intervention programs are three, four, or five years old.

TYPE OF PROGRAM

During the 1990-91 school year, children and their families could receive early intervention services in one of three ways: through Regional Programs, through county community mental health programs, or through a combination of both programs. A total of 1,992 OPAS scoresheets (97%) included information about type of program (see Figure 10).

Regional Programs are funded through the Oregon Department of Education. They were established at six sites situated in different geographical areas of the state. Their purpose is to make technical expertise and program support available to educators who work with infants and children having low-incidence disabilities. Children who are vision impaired, hearing impaired, have autism, or a severe orthopedic impairment are eligible for early intervention services through Regional Programs. Eight percent of the OPAS scoresheets specified the

type of program as Regional only. The percent is low because, by definition, the impairment that would qualify a child for a Regional Program, occurs at a very low rate.

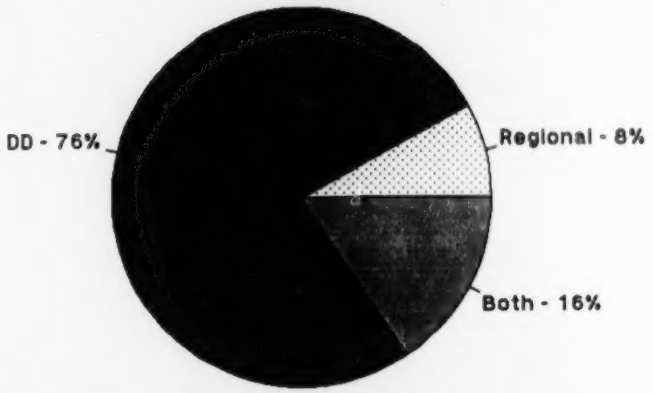


Figure 10. Most infants and children in early intervention programs are enrolled in DD Programs.

Community Mental Health Programs are funded through the Oregon Mental Health and Developmental Disability Services Division. The focus of these programs is infants and children who have a developmental disability such as mental retardation, cerebral palsy, seizures, or a neurological impairment. Because of their focus, the Community Mental Health Programs are known as "DD" (for developmental disability) Programs. Most infants and children in early intervention programs have (or are at risk of having) a developmental disability. Seventy-six percent of the children with OPAS scoresheets were in DD Programs during the 1990-91 school year.

Both Regional and DD Programs were marked on sixteen percent of the returned OPAS scoresheets. Children with both a low-incidence impairment and a developmental disability qualify for services through each program and may receive support from both.

LEVEL OF INTEGRATION

Agencies throughout the United States are encouraging the placement of children with disabilities in environments with children who do not have disabilities. These "integrated" programs are favored by many educators and parents because they provide opportunities for children with disabilities and those without to learn about and develop friendships with each other; to understand the abilities of children with disabilities and what they need to live and learn; and to help everyone be part of the diverse society in which they live.

Because integration is important to children, level of integration is tracked as part of the OPAS assessment process. Five levels of integration are defined: Full integration is a regular educational program in which children are in a program that is attended by children with and without disabilities. Partial integration means children attend both a regular educational program and one that is designed for early intervention children only. EI Partial means that the child is placed in an early intervention program that also includes children without disabilities; None means that the early intervention program provides no formal opportunities for integration with children who do not have disabilities. Home-Based Only means the child does not attend a program with other children - but support through parent consultation is made available. Figure 11 shows the overall percent of children at each level of integration.

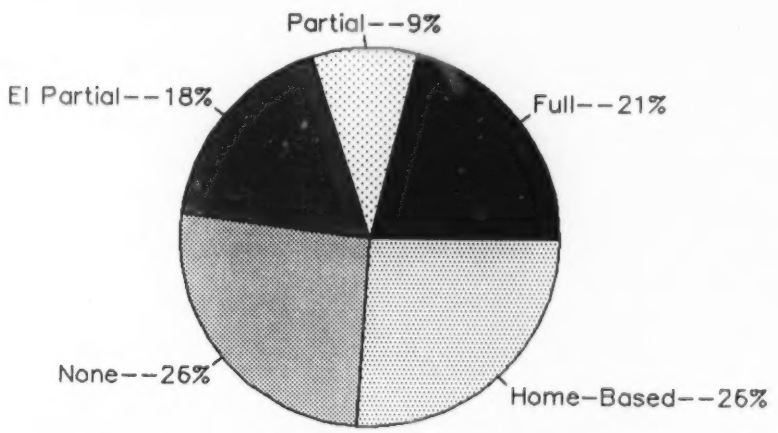


Figure 11. Percent of children at each level of integration.

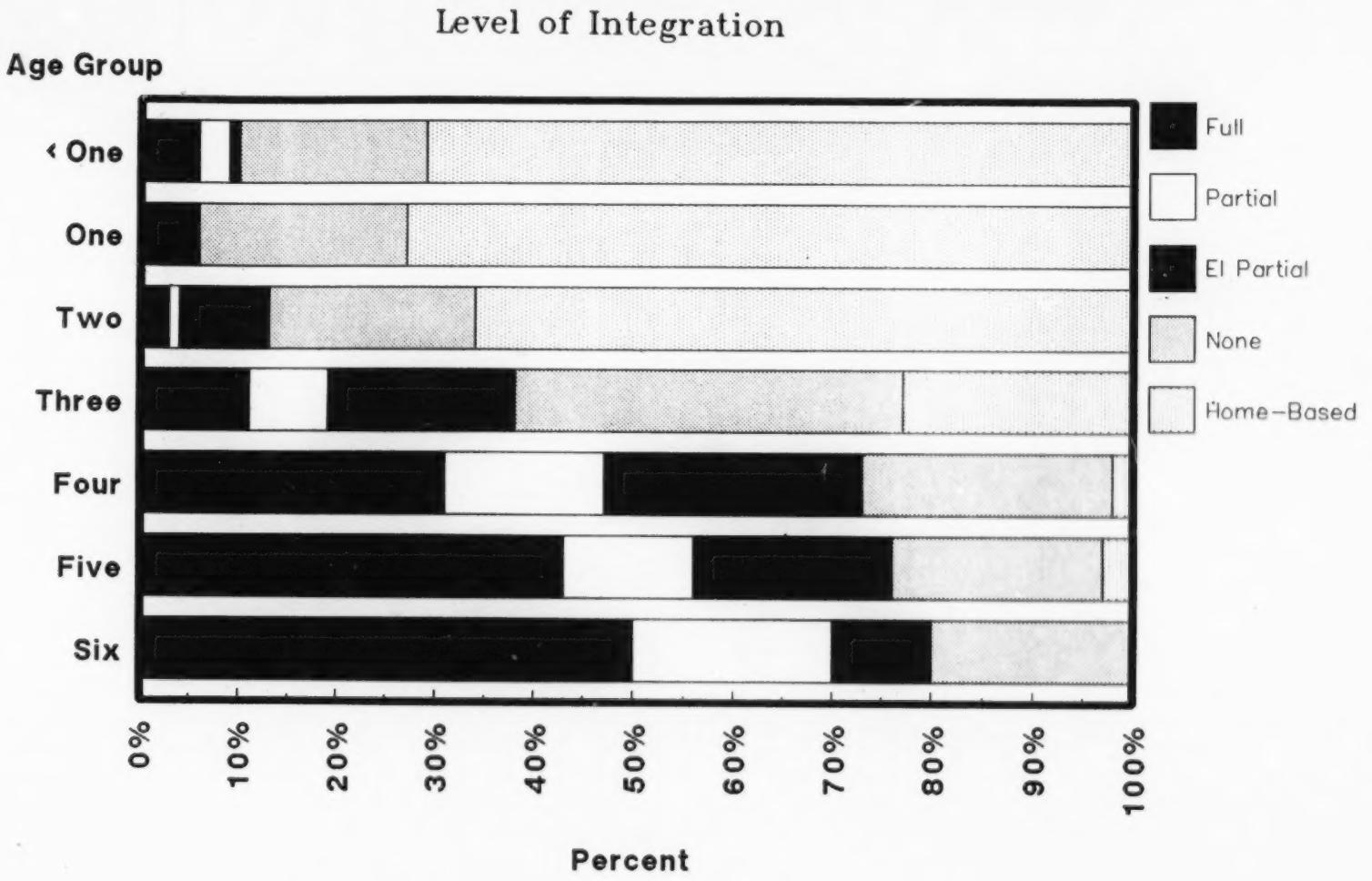


Figure 12. Percent of children by level of integration and age.

Most children in early intervention programs remain at home while they are very young (see Figure 12). At two years or younger, OPAS data indicates that infants and very young children (71% of infants younger than one year, 73% of one-year-olds, and 66% of two-year-olds) used Home-Based Only support. At age 3, almost 40% of children spent at least a portion of each week in non-integrated programs; placements in regular education programs, however, had increased to almost 20%. By four years old non-integrated placements begins to decline and the percent of children who spend at least a portion of their week in regular classes increases dramatically (to 47%). This increase continues as 56% of five-year-olds and 70% of those who are older than five spend time in regular classes.

DETERMINATION OF ELIGIBILITY

Eligibility for early intervention services is defined by Oregon Administrative Rules. To be eligible, a child must have a significant developmental delay in certain skill areas. Table 2 shows the number of OPAS scoresheets in which the amount of delay was reported for each of the seven areas. The percent of scoresheets for which data was reported has been nearly the same each year OPAS data has been summarized. A disability in an area can be relatively severe (defined as a delay of 76% or more), moderately severe (a delay of 51-75%) , moderate (a delay of 26-50%), or mild (a delay of 1-25%). Data in Table 3 shows that the majority of delays were in the range of moderate and moderately severe.

Area	Number	Percent
Gross	814	40%
Fine	842	41%
Expressive	990	48%
Receptive	914	45%
Cognitive	649	32%
Self-Help	655	32%
Relationship	587	29%

Table 2. The number and percent of OPAS data sheets for which eligibility information is available - by area.

	Percent of Delay				
	No Delay	Mild Delay	Moderate Delay	Moderately Severe Delay	Severe Delay
	0%	1-25%	26-50%	51-75%	76-100%
Gross Motor	1%	14%	32%	38%	15%
Fine Motor	1%	13%	35%	38%	13%
Receptive Language	1%	10%	42%	41%	6%
Expressive Language	1%	13%	33%	44%	9%
Cognitive Skills	2%	16%	31%	40%	11%
Self-Help	1%	18%	32%	35%	14%
Relation-ships	2%	13%	33%	42%	10%

Table 3. Percent of infants and children by amount of delay and area of delay.

In the next section of the *Showing Progress Report* results from the 1991 school year are presented.

IV. RESULTS

In Section III of this report, "Demographics," data included all OPAS scoresheets that the Oregon Department of Education received in the spring of 1991. In this section, "Results," data is analyzed to examine children's mastery of items. Only scoresheets for those children who have an OPAS scoresheet for both the spring of 1990 and the spring of 1991 are included. There were matches for 50% of the children in the 1990 school year; in 1991 there were matches for 1,004 scoresheets (49%).

	1989 N=934	1990	Gain	1990 N=1,004	1991	Gain
Social	68%	77%	9%	68%	78%	10%
Comm	44%	56%	12%	44%	58%	14%
Cog	41%	52%	12%	41%	52%	11%
Acad	6%	12%	6%	7%	12%	5%
Self	44%	56%	12%	45%	58%	13%
Motor	60%	60%	9%	61%	71%	10%

Table 4. Percent of items mastered shows general gains for each area of OPAS both for this and for the previous year.

State Averages

The data presented in Tables 4 and 5 and Figure 13 include children birth through five years old; those with severe, moderate, and mild disabilities; and those in many types of educational programs. In spite of these many differences in children, gains are clearly evident across all areas of this year's OPAS data. The remainder of this section of the *Showing*

Progress Report organizes this summary information by characteristic.

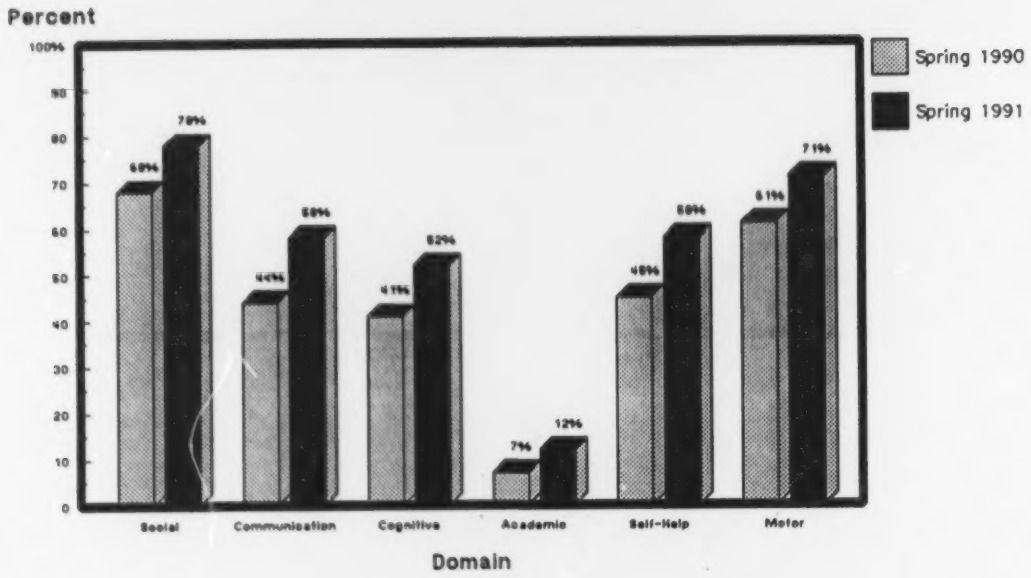


Figure 13. In general, infants and children in early intervention programs are mastering skills in all areas measured by OPAS.

	Total Items	Spring 1990 Avg.	Spring 1990 Percent	Spring 1991 Avg.	Spring 1991 Percent
Social	20	15.4	77%	15.6	78%
Commun	45	25.4	56%	26.0	58%
Cognitive	21	11.0	52%	11.0	52%
Academic	27	3.4	12%	3.3	12%
Self-Help	37	20.8	56%	21.6	58%
Motor	59	40.8	69%	41.9	71%

Table 5. Average number of items mastered and percent mastered show a general stability in how well early intervention infants and children have been progressing during the last two years.

Age Groups

Age data is available for 977 infants and children who have both spring 1990 and spring 1991 OPAS scoresheets. Figure 14 shows the distribution of scoresheets by age group. Because very young infants are not old enough to have had two years of OPAS data, they naturally have no matches. As in previous years, most children with matching data are between the ages of three and five.

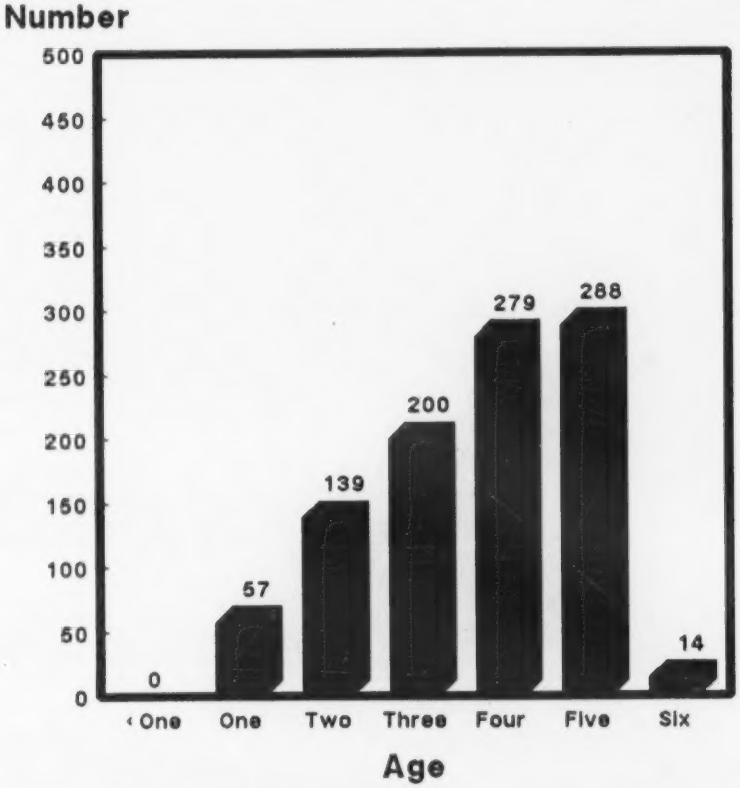


Figure 14. Number of infants and young children with both spring 1990 and spring 1991 OPAS data.

Figure 15 profiles the percent of items mastered within each domain by age. Lower percents in academics for ages 1, 2, and 3 are considered appropriate because academic skills are not typically taught for these age groups. The data show that, as might be expected, older children have mastered more skills

than children who are younger - across all domains that were assessed. As in previous years, academic ratings are lower than the other domains. This may be because academic skills are less functional than the other areas and skills that are emphasized in this area are not required in every day life. Academic skills - reading, writing, and numbers - may be more difficult to acquire. In addition, functional skills may be instructionally emphasized more than academics.

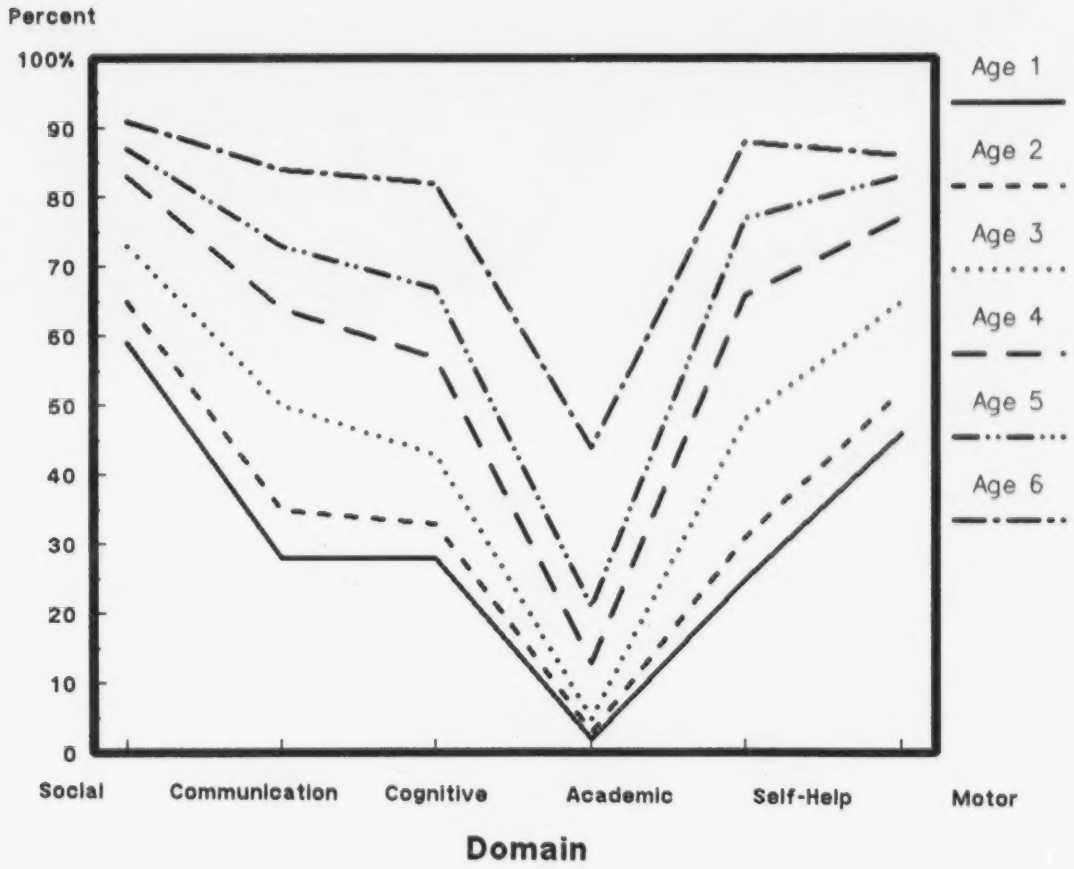


Figure 15. Spring 1991 results by age group.

Gains in percent of items mastered were strong in each of the six assessed domains (see Figure 16). The gains of older children were less in the domains of social and motor skills because by the time they are five years old many of the older preschoolers are competent in these areas. On the other hand, academic mastery begins to sharply rise as children approach elementary school age. Significant academic gains begin at about age four when reading, writing, and numbers begin to be introduced in preschool programs.

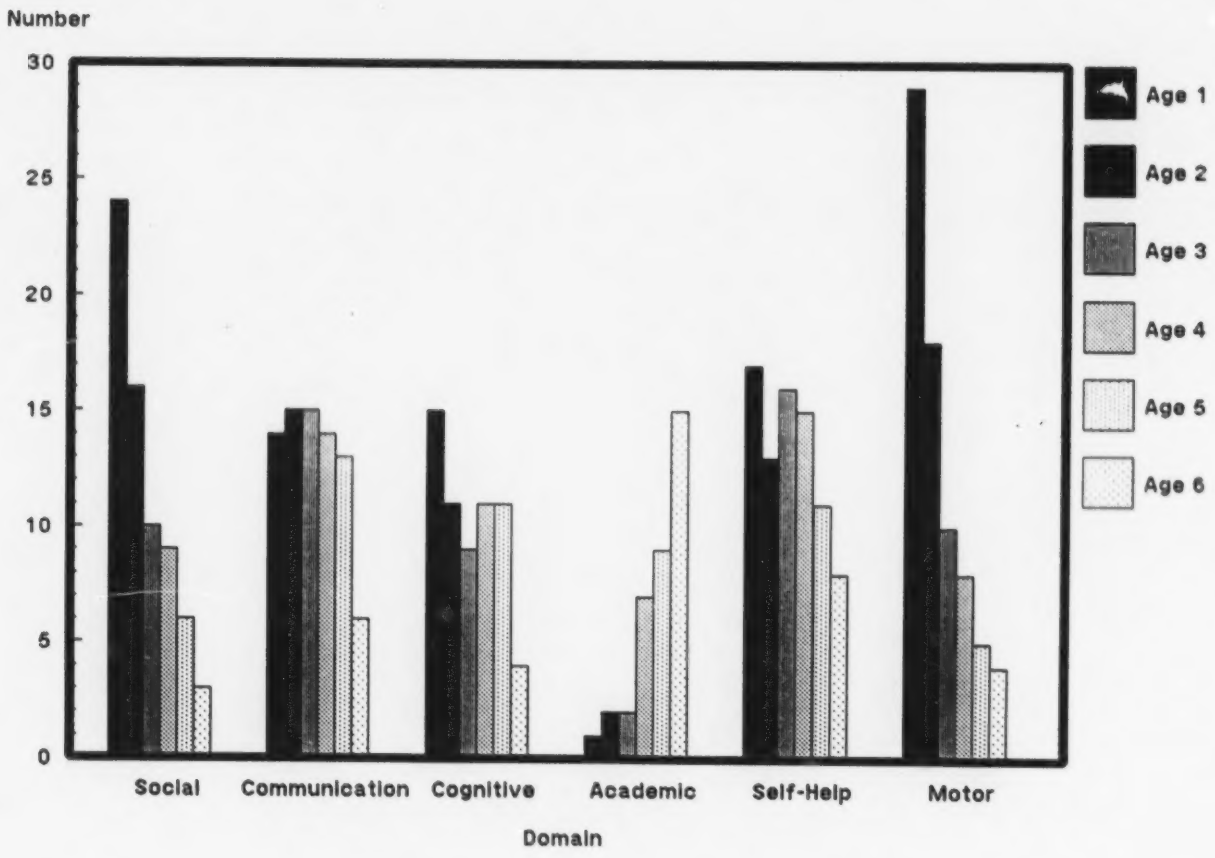
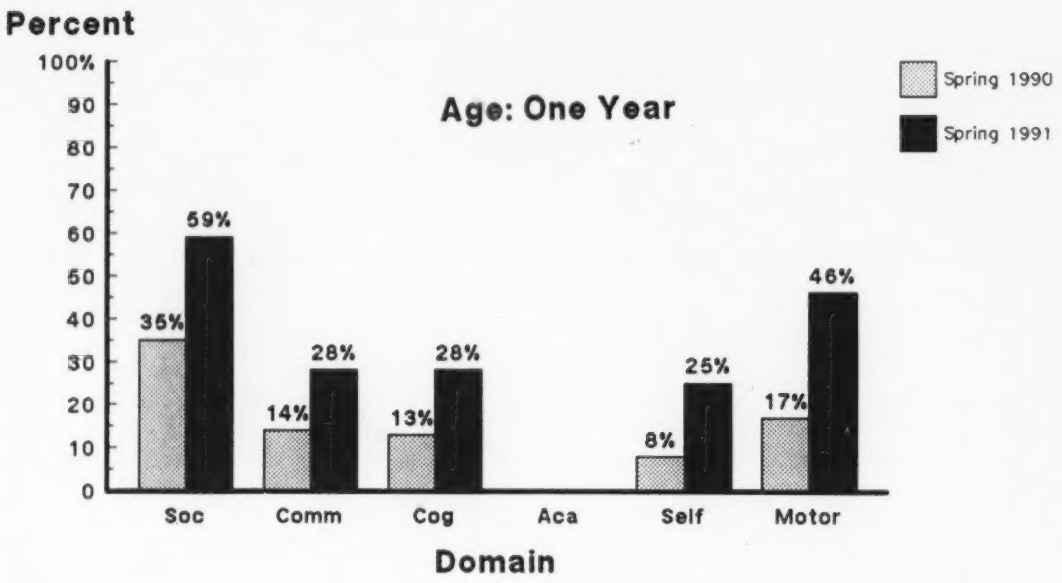
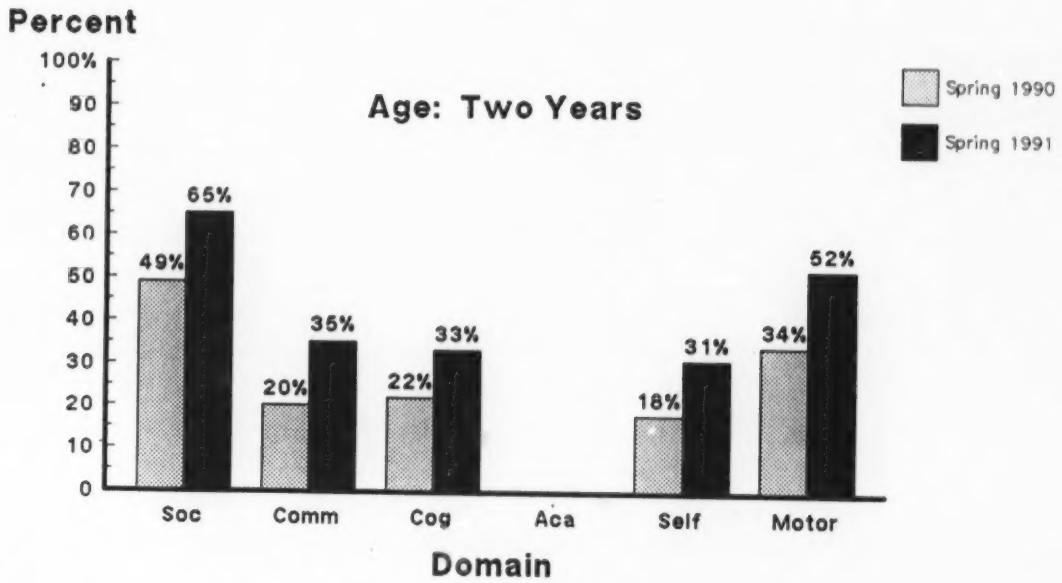


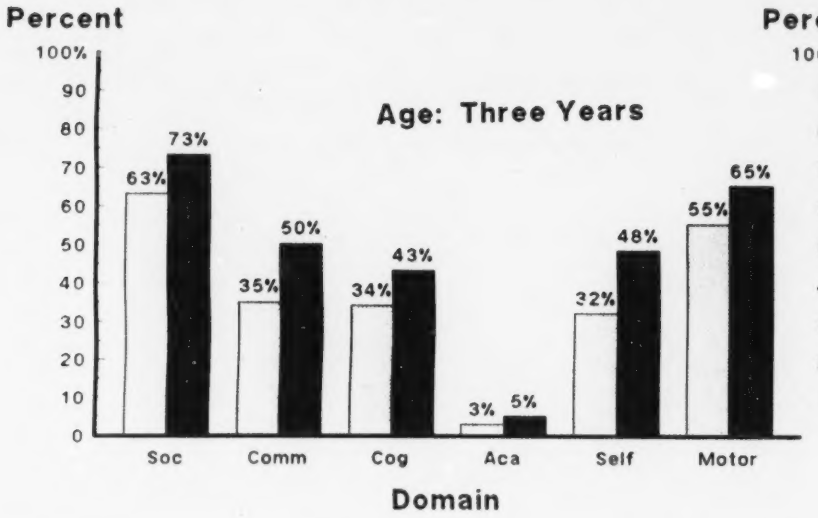
Figure 16. Gains for each domain by age group.

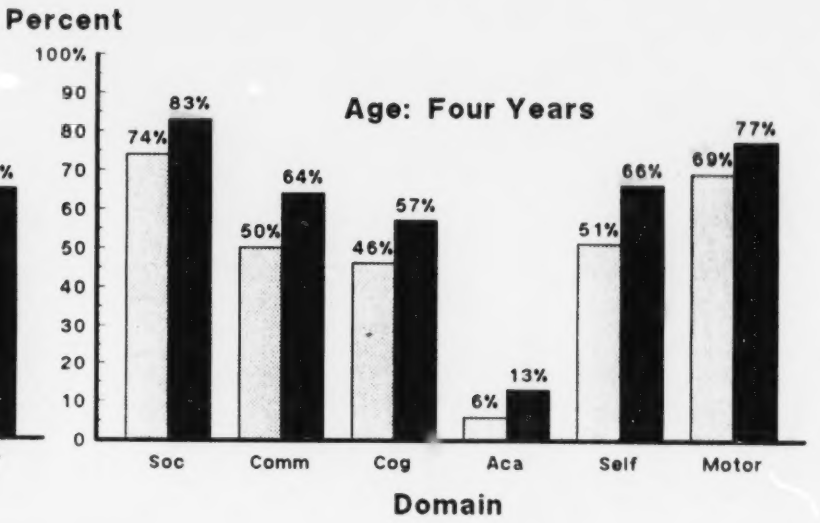
Percent of items mastered are organized by age group in the following figures. In spite of variations among programs and the many differences in children, significant gains in mastery have occurred for all age groups.

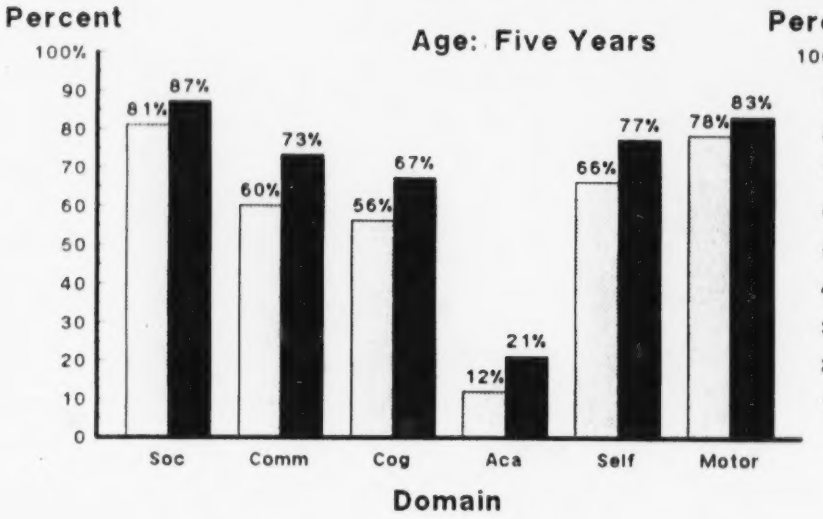


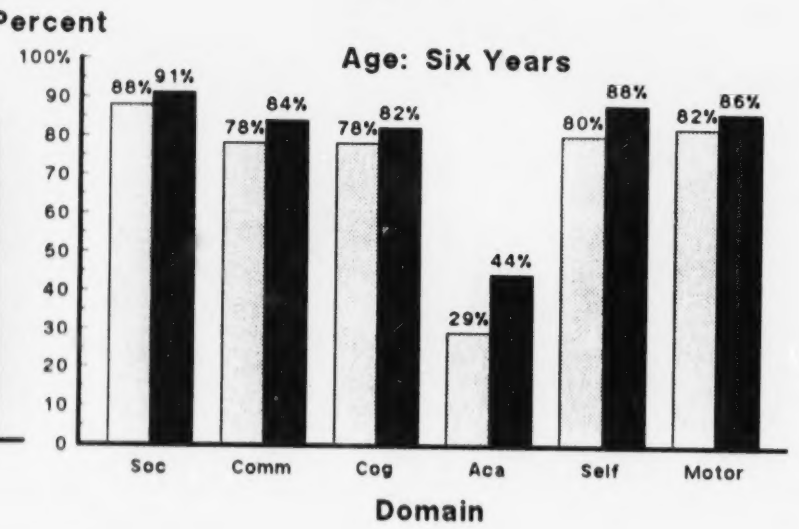


Figures 17 through 22. Percent of items mastered by age group.


Percent
Age: Three Years
100%
90
80
70
60
50
40
30
20
10
0
63%
73%
35%
50%
34%
43%
3%
5%
32%
48%
55%
65%
Soc
Comm
Cog
Aca
Self
Motor
Domain


Percent
Age: Four Years
100%
90
80
70
60
50
40
30
20
10
0
74%
83%
50%
64%
46%
57%
6%
13%
51%
66%
69%
77%
Soc
Comm
Cog
Aca
Self
Motor
Domain


Percent
Age: Five Years
100%
90
80
70
60
50
40
30
20
10
0
81%
87%
60%
73%
56%
67%
12%
21%
66%
77%
78%
83%
Soc
Comm
Cog
Aca
Self
Motor
Domain


Percent
Age: Six Years
100%
90
80
70
60
50
40
30
20
10
0
88%
91%
78%
84%
78%
82%
29%
44%
80%
88%
82%
86%
Soc
Comm
Cog
Aca
Self
Motor
Domain

Type of Program

Children in early intervention can be enrolled in different types of educational programs. Regional programs provide educational support to children with an impairment that occurs relatively infrequently such as a vision impairment, a hearing impairment, physical impairments, and autism. There were 83 children with OPAS scoresheets for both spring 1990 and spring 1991 enrolled in Regional programs (see Figure 23). This group of children tends to acquire some skills faster than children with a developmental disability because their impairments are not cognitive. On the other hand, children with physical impairments may have more difficulty with some items that require physical dexterity.

Most children in early intervention programs have a developmental disability (DD) such as mental retardation, epilepsy, or a neurophysiological impairment. During the 1991 school year a total of 737 (74%) of children with both 1989-90 and 1990-91 OPAS scoresheets were in a DD program.

Children with both a low-incidence disability and a developmental disability receive early intervention services through both regional and DD programs. A total of 171 children with both 1990 and 1991 OPAS scoresheets participated in both types of programs. Their rate of mastery of skills is frequently slower than children with a single program because they have multiple impairments.

The profile of skill acquisition described above can be seen in Figures 23 through 26 on the following two pages. Average percent of skills mastered shows that children in all three types of program options made substantial gains in each of the areas assessed by OPAS.

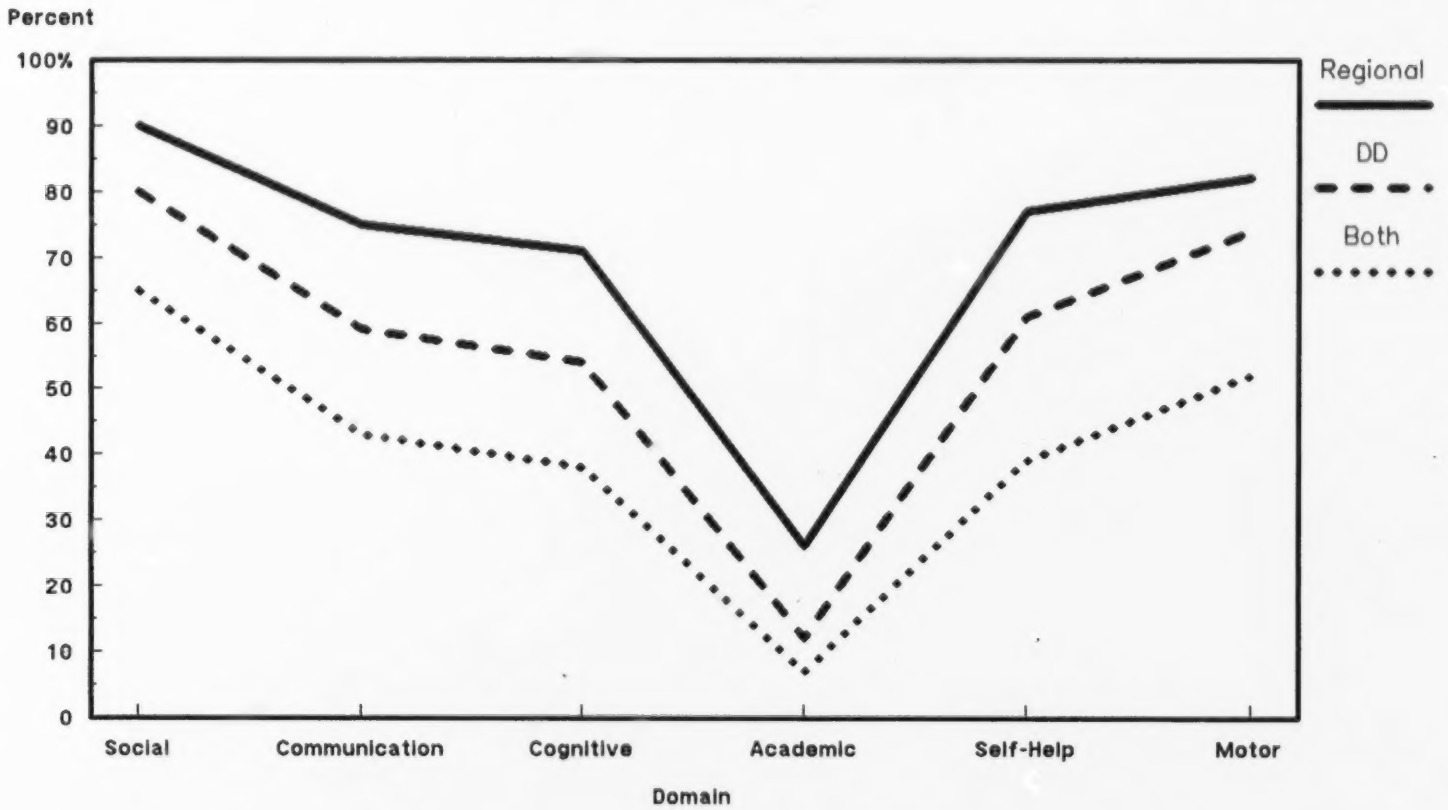


Figure 23. Average profile of items mastered by type of program.

Children in regional programs averaged a higher percent of items mastered in every area than children in DD programs. Data indicated that children in both DD and Regional programs, while showing the least percent of items mastered, had substantial gains nevertheless.

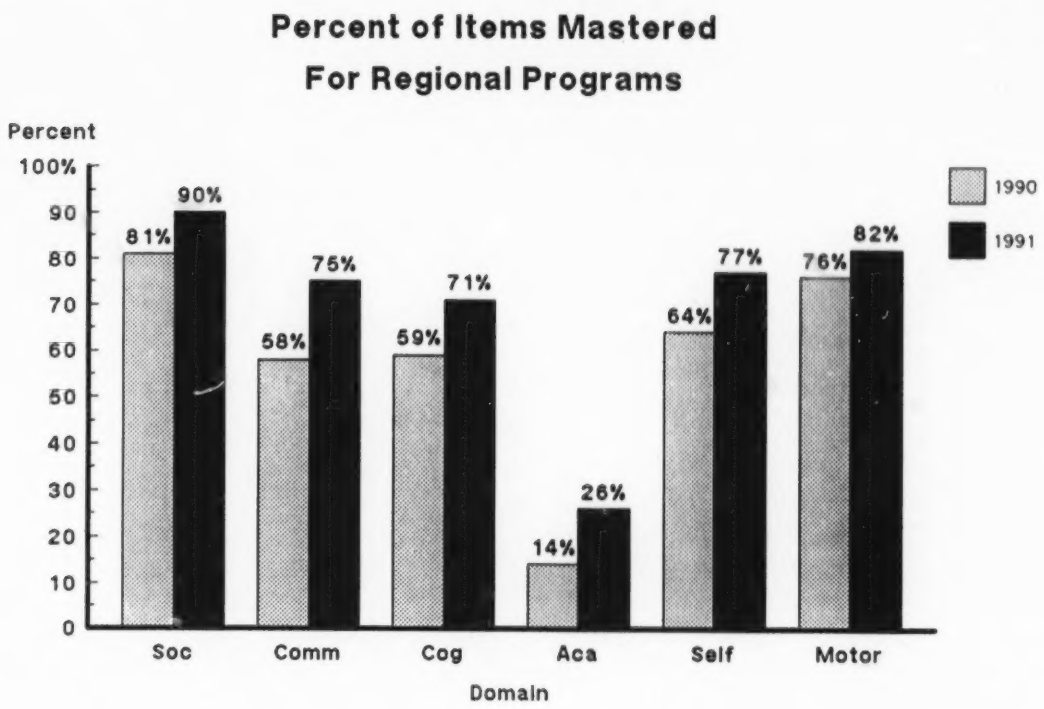
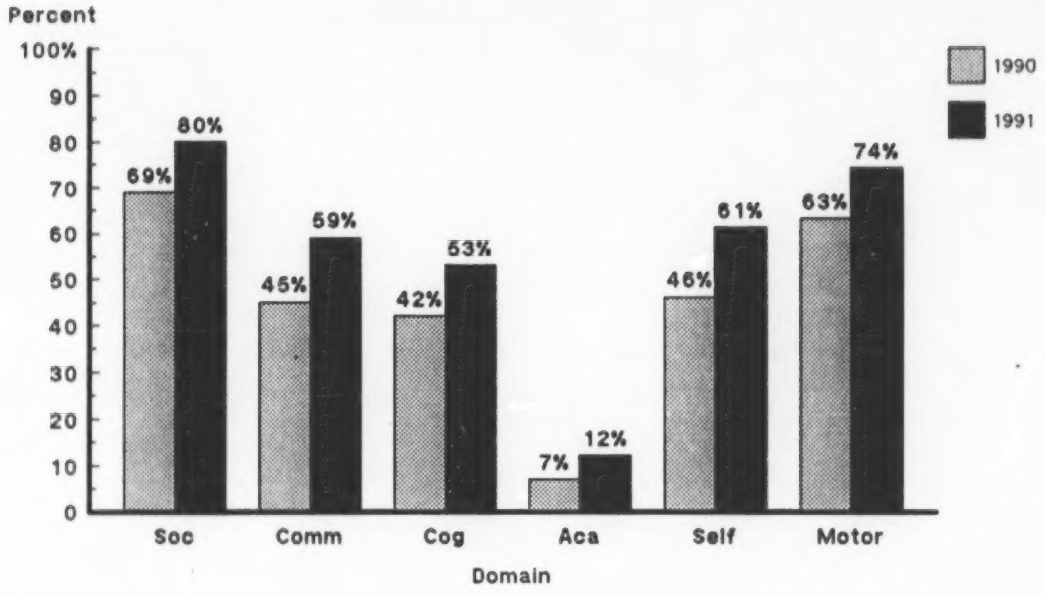
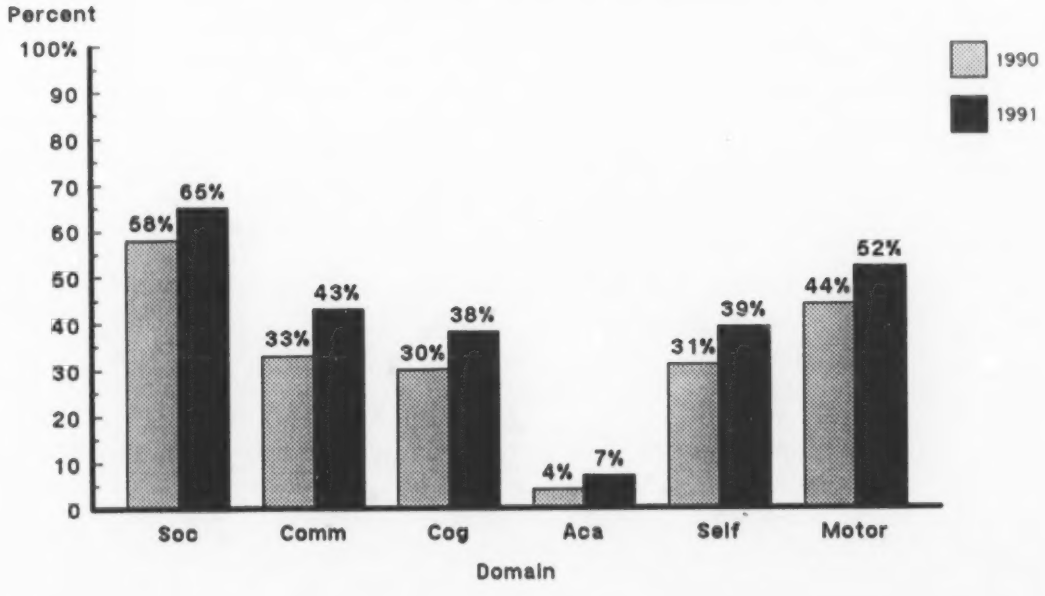


Figure 24 through 26. Progress by type of program.

Percent of Items Mastered
For DD Programs



Percent of Items Mastered
Both DD and Regional Programs



Percent Delay

Infants who are 18 months or younger are eligible for early intervention based on a referral or recommendation from a physician. Children who are older than 18 months must have an identifying disability (a developmental disability, vision impairment, or hearing impairment) and have a substantial delay in certain areas. A delay is the discrepancy between the child's level of functioning and that of average children of the same age. The severity of any delay is determined by an early intervention specialist who assesses the child in seven areas: Gross Motor, Fine Motor, Expressive Language, Receptive Language, Cognitive, Self-Help, and Relationships. A delay of 75% means the child is functioning at about 25% of chronological age. A delay of 25% means the child is functioning at 75% of chronological age.

Ideally, percent delay information would be reported for each area on every scoresheet. In past years almost half of the scoresheets have included no information about percent delay. Staff from the Oregon Department of Education and the Mental Health and Developmental Disability Services Division have provided training to early intervention specialists throughout the state on the meaning of this term and its importance in documenting eligibility. This year 522 of the OPAS scoresheets with matches in the 1990 school year (52%) contained information about percent delay.

Because much of the percent delay information is missing, the data from many scoresheets cannot be analyzed by this characteristic. Nevertheless, there are four areas in which nearly 40% of the matching scoresheets contained percent delay information: Gross Motor, Fine Motor, Receptive Language and Expressive Language (Table 6). The data for each of the four areas has been grouped by amount of delay. "0" means no delay in that area; 1-25% includes children with a mild delay; 26-50% means children with a moderate delay; 51-75% is children with a moderately severe delay; and 76-100% refers to children with a severe delay in that area. There were gains in every area assessed in OPAS regardless of the severity of the delay. This information is important because it indicates that children in early intervention programs are making significant gains regardless of the severity of their disabilities.

Gross Motor

Delay	1990	1991	Gain
0 (N=5)	62%	77%	15
1-25 (N=55)	84%	89%	5
26-50 (N=132)	82%	88%	6
51-75 (N=147)	85%	91%	6
76+ (N=53)	78%	83%	5

Fine Motor

Delay	1990	1991	Gain
0 (N=4)	94%	96%	2
1-25 (N=64)	80%	86%	6
26-50 (N=158)	79%	86%	7
51-75 (N=128)	78%	87%	9
76+ (N=47)	77%	86%	9

Receptive Language

Delay	1990	1991	Gain
0 (N=3)	93%	93%	0
1-25 (N=68)	83%	91%	8
26-50 (N=149)	80%	90%	10
51-75 (N=168)	75%	88%	13
76+ (N=32)	77%	86%	9

Expressive Language

Delay	1990	1991	Gain
0 (N=2)	44%	56%	12
1-25 (N=58)	66%	66%	0
26-50 (N=190)	67%	81%	14
51-75 (N=177)	66%	79%	13
76+ (N=23)	66%	74%	8

Table 6. Progress data and gains by amount of delay in four areas.

Level of Integration

Level of integration information was available for 526 or 52% of children with matching OPAS scoresheets. Items mastered by level of integration is given in Figure 27 and shows that children who are fully integrated have mastered more items than children in other placements. This information is not surprising because children in fully integrated placements tend to be older. In the same way, Home-Based results are relatively low because of the very young age of infants and children who are in this integration option.

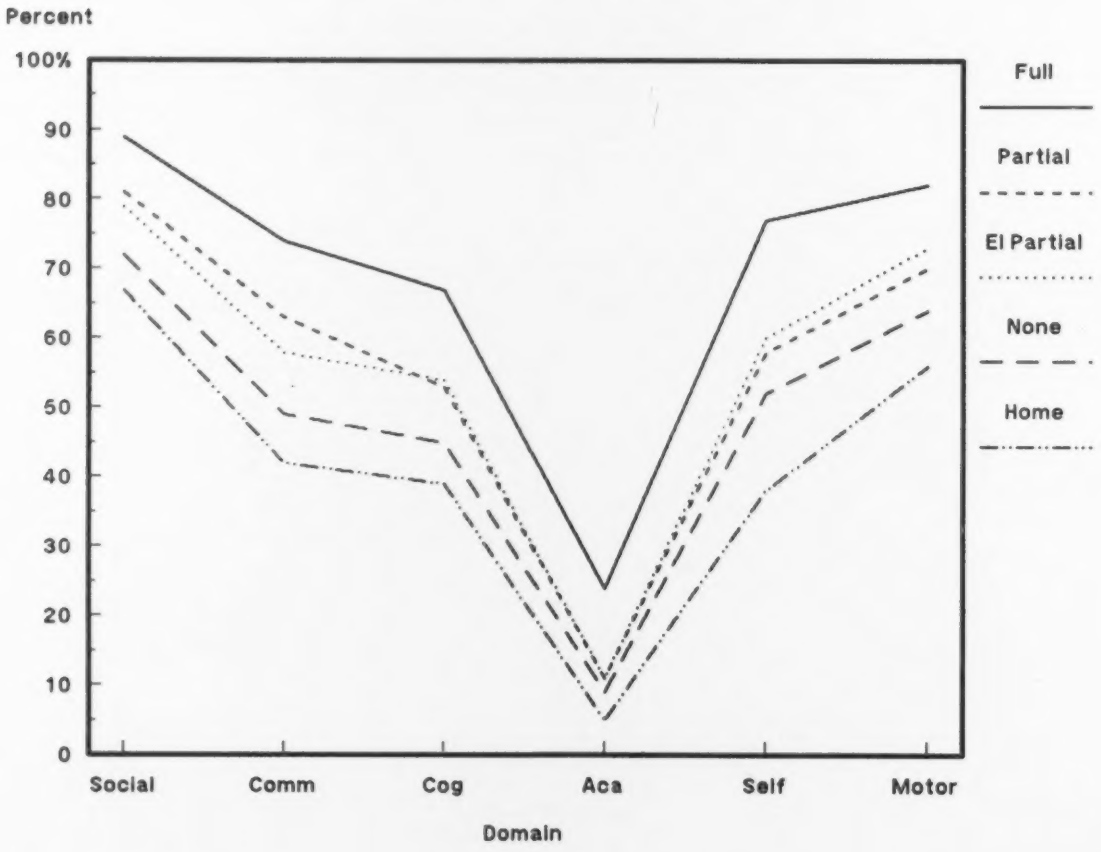
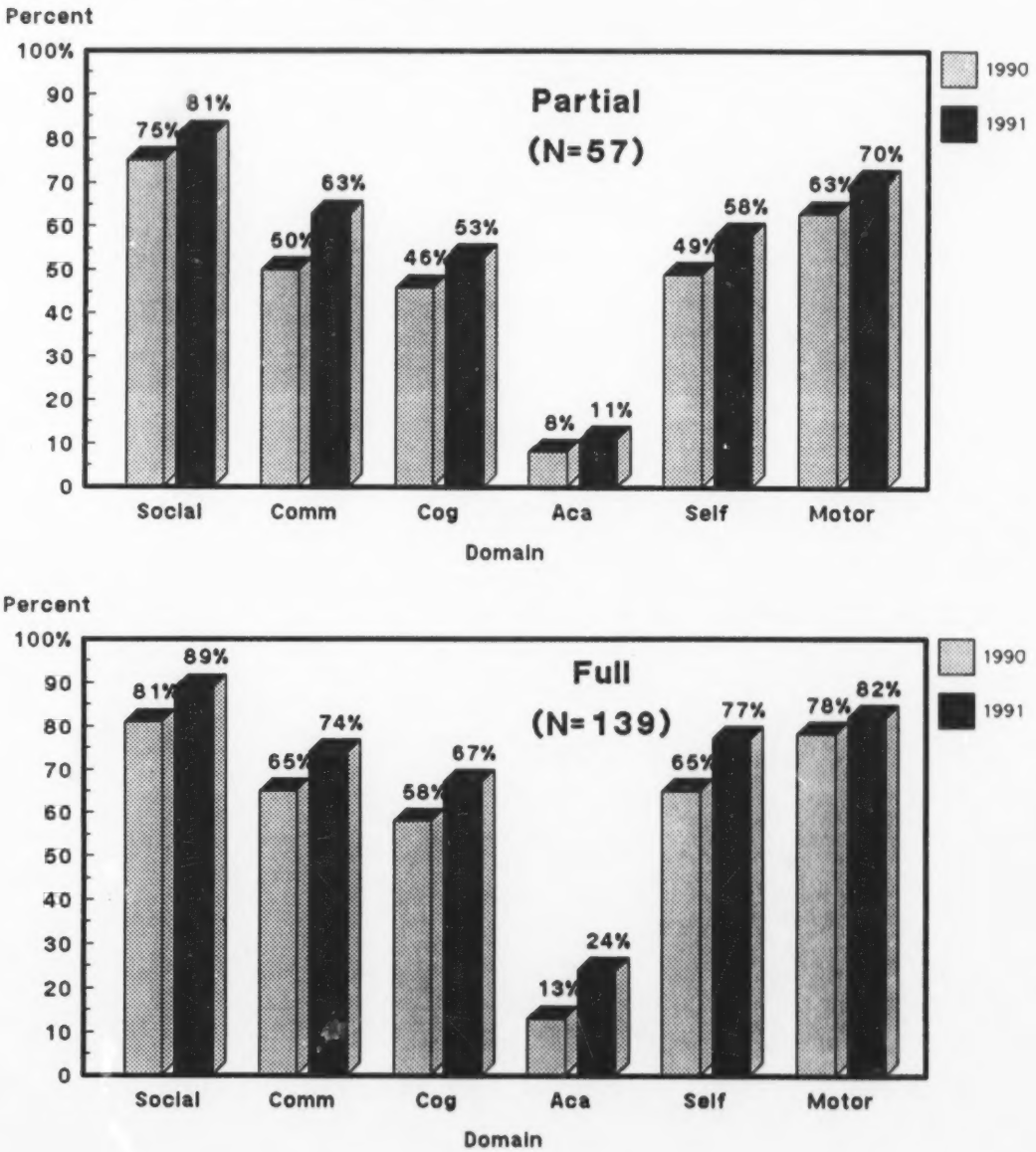
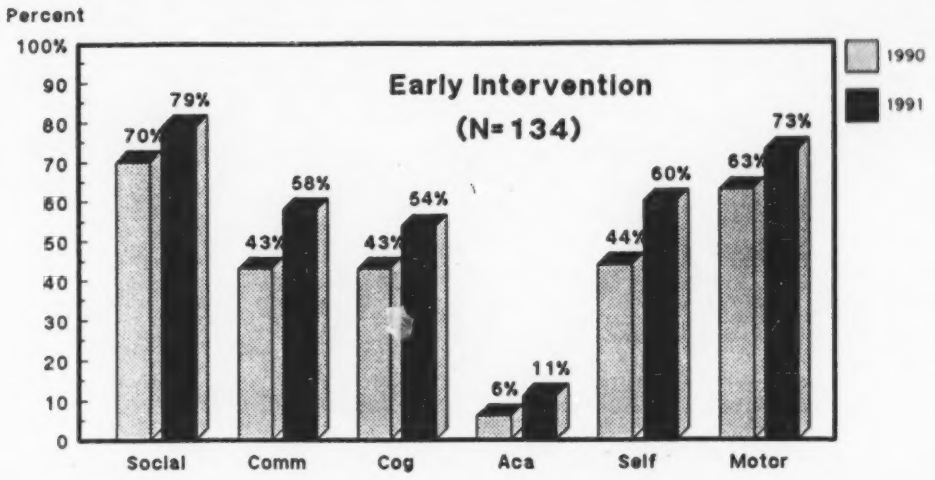


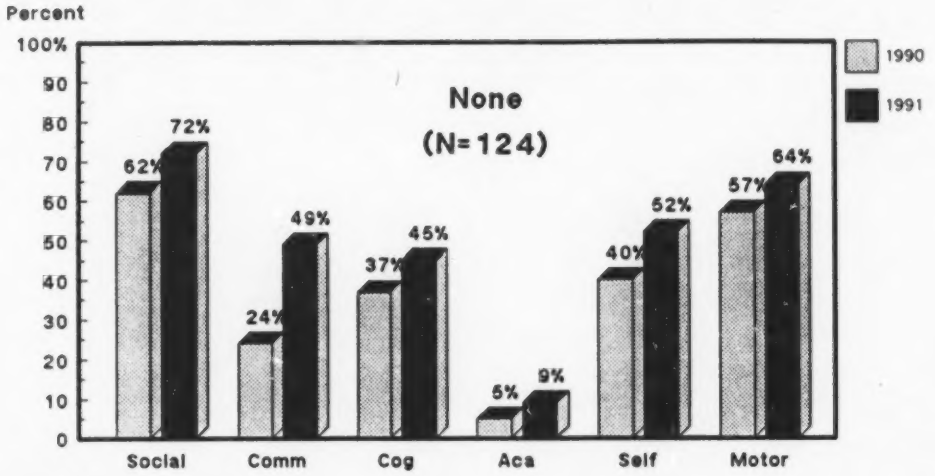
Figure 27. Item mastery by level of integration.

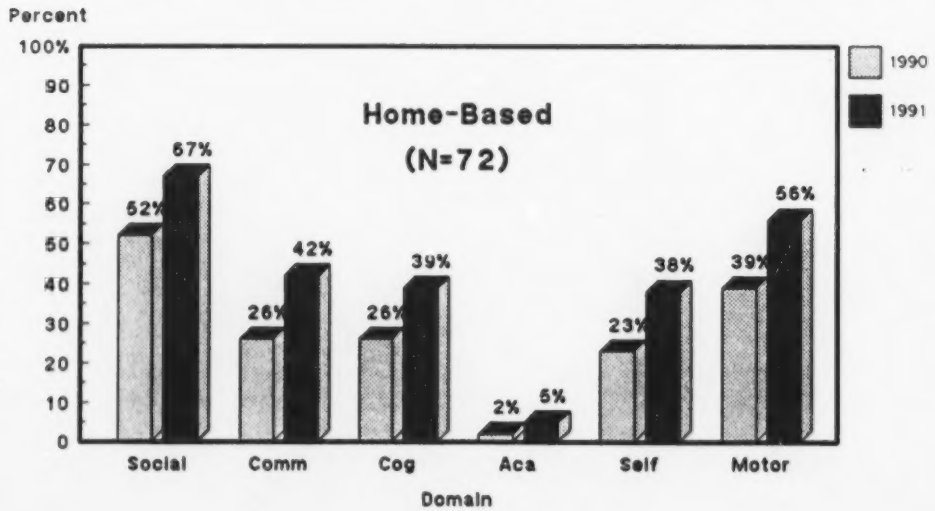
Figures 28 through 32 profile the average progress of infants and children by level of integration. The important point about these results is that gains are being made in every level. This information indicates that, in general, infants and children in early intervention programs are learning regardless of the type of integration option that is used.



Figures 28 through 32. Progress data by level of integration.


Percent
100%
90
80
70
60
50
40
30
20
10
0
Early Intervention
(N=134)
1990
1991
70%
79%
43%
58%
43%
54%
6%
11%
44%
60%
63%
73%
Social
Comm
Cog
Aca
Self
Motor


Percent
100%
90
80
70
60
50
40
30
20
10
0
None
(N=124)
1990
1991
62%
72%
24%
49%
37%
45%
5%
9%
40%
52%
57%
64%
Social
Comm
Cog
Aca
Self
Motor


Percent
100%
90
80
70
60
50
40
30
20
10
0
Home-Based
(N=72)
1990
1991
52%
67%
26%
42%
26%
39%
2%
5%
23%
38%
39%
56%
Social
Comm
Cog
Aca
Self
Motor
Domain

VI. SUMMARY

In summary, the data from this year's *Showing Progress Report* again indicate that infants and children in early intervention programs in Oregon are making substantial gains in all areas assessed by the Oregon Preschool Assessment System. These gains occur across age groups, type of program, severity of disability, and level of integration. Based on this year's OPAS data, early intervention is clearly a successful approach to teaching infants and children with disabilities.

VII. RECOMMENDATIONS

The 1991 data from the Oregon Preschool Assessment System clearly indicates that infants and children are learning skills in early intervention programs. It would be useful to have a larger sampling of data focusing on percent of delay and level of integration. However, the authors do not have suggestions for increasing the amount of data in these areas other than continued contact with teachers in early intervention programs to explain the importance of this information.

It is, however, time to review and revise the content and use of the Oregon Preschool Assessment System. The OPAS materials were designed in 1985. In order to reflect changing values within the field of early intervention, assessments such as this must be regularly revised and field tested. With growing expectations about the skills that children with disabilities can acquire, it may be appropriate to add more difficult items to some domains. Because levels of progress have been consistently low in the "Academic" domain, additional, easier items may be helpful to give a more complete picture of academic progress. The only recommendation for this year's

Showing Progress Report is to examine the OPAS approach to assessment to see if it still meets the needs of the state, review items for their importance, and delete or add new items as reviewers and field testers feel it is useful to do so.

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State Superintendent
of Public Education